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**FLORIDA PROFIT/NON PROFIT CORPORATION
BLOOMING NAILZ AT THE WALK CORP**

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

BLOOMING NAILZ AT THE WALK CORP

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TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

11450 NW 56 DRIVE #109

CORAL SPRINGS, FL 33076

ARTICLE III SHARES

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARIA TORRES

11450 NW 56 DRIVE #109

CORAL SPRINGS, FL 33076

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TALLAHASSEE FLORIDA**

ARTICLE V INCORPORATOR(S)

The name(s) and address(es) of the incorporator(s) to these Articles of Incorporation is (are):

MARIA TORRES

11450 NW 56 DRIVE #109

CORAL SPRINGS, FL 33076

ARTICLE VI DIRECTOR(S)


The name(s) and address(es) of the director(s) to these Articles of Incorporation is (are):

MARIA DEL PILAR TORRES

11450 NW 56 DRIVE #109

CORAL SPRINGS, FL 33076

The undersigned incorporator(S) has have executed these Articles of Incorporation in this September 15, 2010.

A handwritten signature in black ink, appearing to read 'MDP', is written over a horizontal line.

SIGNATURE

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TALLAHASSEE FLORIDA**

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under laws of the State of Florida, submits the following statement in designating office/registered agent, in the State of Florida

1. The name of the corporation is:

BLOOMING NAILZ AT THE WALK CORP

2. The name and address of the registered agent and office is:

MARIA TORRES

11450 NW 56 DRIVE #109

CORAL SPRINGS, FL 33076

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE



DATE SEPT. 15, 2010